

Wisconsin Department of Safety and Professional Services
Application for Review - Buildings, HVAC, Lighting,
Fire and Components – SBD-118

Personal information you provide may be used for secondary purposes [Privacy Law s. 15.04(1)(m), Stats.]

Office Use Only: Trans ID: _____
Assigned Reviewer: _____
Assigned Office: _____
Reviewer Start Date*: _____

For scheduling of building, HVAC, and fire plans, use the electronic online request for commercial building plan appointments: <http://dsps.wi.gov/sb/SB-DivPlanReview.html>. This form is to be used only for mailing or dropping off plans without an appointment, or if you are scheduling a **Revision or Lighting** via Fax (see Box 13 for further information). Check website: at <http://dsps.wi.gov/sb/SB-DivForms.html> for the most current version of this form. **S&B may re-distribute plans to another office if needed to reasonably balance turnaround times.** You may monitor the status of your plan: <http://dsps.wi.gov/sb/SB-DivReviewStatusSearch.html>

Enter Previous Related Trans. ID if applicable: _____
If no previous related transaction is provided, plan review will be based on the current code, except for revisions. If a previous related transaction is entered and the parent building approval transaction has not expired, you may elect below to use the code in effect at the time of that approval for follow-up revision, HVAC, and fire protection submittals related to that building approval. Note that this submittal's approval would then expire no later than the parent building approval.

Please review under the code in effect at the time of the parent building approval.
Circle your choice of office: 1. Next available appt in any office 2. Green Bay
3. Hayward 4. LaCrosse 5. Madison 6. Waukesha

For Scheduling Revisions by Fax - Enter date plan will be in our office: _____
Where should we send the appointment confirmation: Email: Fax _____

- 1.a. Type of Submittal or Service Requested (check all that apply)**
- New
 - Alteration – Level: 1 2 3
 - Addition/Alteration–Level: 1 2 3
 - Approval Extension
 - Revision
 - Footing & Foundation Plans Only
 - Permission to Start
 - Follow Up of a Denial Within 8 Months
 - Preliminary Consultation (contact reviewer before scheduling or submitting)
 - Structural Framework – Shell Only
 - Multiple Identical Buildings (see box 5)
Number of Buildings _____

- b. Objects Submitted for Review as Current Review (check all that apply)**
- Building
 - HVAC
 - Emergency Egress Lighting
 - Energy Conservation Lighting
 - Fire Suppression (see box 7)
 - Fire Detection/Alarm (see box 7)
- Other Projects (Stand Alone from above)**
- Bleacher
 - Canopy
 - Kitchen Exhaust Hood
 - Membrane Construction
 - Rack Supported Storage Building
 - Elevated Pedestrian Access

- c. Structural Component Plan(s) which accompany this current plan submittal (check all that apply):**
- Roof Truss Metal Bldg
 - Floor Truss Fire Escape
 - Steel Girder Precast Plank
 - Laminated Wood Precast Wall

- 2. Occupancy Type**
Major Use – Check Use with the Greatest Floor Area
- A Assembly A1 A2 A3 A4 A5
 - B Business/Office B
 - E Educational E
 - F Factory/Industrial F1 F2
 - H Hazardous H1 H2 H3 H4 H5
 - I Institutional/Daycare/CBRF I1 I2 I3 I4
 - M Mercantile/Retail M
 - R Residential R1 R2 R3 R4
 - S Storage S1 S2
 - U Utilitv/Misc U
- Additional Non-Accessory Occupancies – Circle All that Apply)

3. Construction Information
Construction Class – Circle One
IA IB IIA IIB IIIA IIIB IV VA VB

Area (project area, include all levels): _____ sq ft
If different, Heated/ventilated Area: _____ sq. ft
Sprinklered/Detector Protected Area: _____ sq. ft

Number of Floor Levels _____
Total Building Volume < 50,000 Cu. Ft. ___ Yes ___ No

Seismic Review Threshold (circle one)
1. B-F and greater than 1 story 2. A or 1 story
3. Non-Structural Alteration

4. Project Information – Fill in all known information Site Number If Known _____

Project/Site Name _____
Tenant name or building designation _____
Previous Tenant Name _____
Number & Street _____
County _____ City () Village () Town () of _____

5. Identical Buildings (NOTE: Complete a separate application for each non-identical building)

| Building/Facility Name/Designation | Building/Facility Address |
|------------------------------------|---------------------------|
| | |
| | |
| | |
| | |
| | |

Designer's Project Number (If Applicable) _____ Add Add'l Sheets if Needed _____

6. After plans are reviewed, please: (check all that apply) *Refers to customer number from below
 Call customer 1, 2, 3, 4 (circle number)* Mail plans to customer 1, 2, 3, 4 (circle number)*
 Hold plans for pickup by designer designated agent

Designer Information (Customer 1) First Time Submitter ___Yes ___No

First Name _____ Last Name _____ Customer Number _____

Company Name _____

Address _____

City _____ State _____ Zip+4 (9 digits) _____

Phone Number (area code) _____ Fax _____ E-Mail _____

Check all applicable
 Designer of ___ Bldg ___ HVAC, ___ Lighting ___ Fire Alarm ___ Fire Suppression
 Supervising Professional of ___ Bldg ___ HVAC
WI Designer Registration # _____ Exp Date _____

Designer Information (Customer 2) First Time Submitter ___Yes ___No

First Name _____ Last Name _____ Customer Number _____

Company Name _____

Address _____

City _____ State _____ Zip+4 (9 digits) _____

Phone Number (area code) _____ Fax _____ E-Mail _____

Check all applicable
 Designer of ___ Bldg ___ HVAC, ___ Lighting ___ Fire Alarm ___ Fire Suppression
 Supervising Professional of ___ Bldg ___ HVAC
WI Designer Registration # _____ Exp Date _____

Property Owner (not lessee) Information (Customer 3)

First Name _____ Last Name _____ Customer Number _____

Company Name _____

Address _____

City _____ State _____ Zip+4 (9 digits) _____

Phone Number (area code) _____ Fax _____ E-Mail _____

Other (Customer 4) ___ Add'l Owner ___ Designer ___ Mail to ___ Payer

First Name _____ Last Name _____ Customer Number _____

Company Name _____

Address _____

City _____ State _____ Zip+4 (9 digits) _____

Phone Number (area code) _____ Fax _____ E-Mail _____

11. Fee Calculation Instructions
 Fee Schedule Summary: Wisconsin Building Code
 Calculate appropriate fee on page 4 and enter total on Page 4.

- I. Building, heating and ventilation, fire alarm and suppression plans. Fees relating to the submittal of all building and heating and ventilation plans (new, addition, alteration) and fire alarm and fire suppression plans shall be computed on the basis of the total gross floor area of each building, area of addition or area of alteration and shall be determined in accordance with Table SPS 302.31-1 or Table 302.31-2

Note: SPS 302 provides for a partial fee refund if a plan action has not been taken within 15 days of receipt of all required information.

Table 302.31-1
 Plan Review Fees for
 Buildings Not Located in Municipalities That Perform Inspections as an agent of the Safety and Buildings Division

| Area (Square Feet) | Building Plans | HVAC Plans | Fire Alarm System Plans | Fire Suppression System Plans |
|--------------------|----------------|------------|-------------------------|-------------------------------|
| Less than 2,500 | \$300 | \$180 | \$50 | \$50 |
| 2,500 - 5,000 | 350 | 250 | 100 | 100 |
| 5,001 - 10,000 | 600 | 350 | 150 | 150 |
| 10,001 - 20,000 | 800 | 450 | 200 | 200 |
| 20,001 - 30,000 | 1,200 | 600 | 250 | 250 |
| 30,001 - 40,000 | 1,600 | 900 | 400 | 400 |
| 40,001 - 50,000 | 2,100 | 1,200 | 550 | 550 |
| 50,001 - 75,000 | 2,900 | 1,600 | 800 | 800 |
| 75,001 - 100,000 | 3,600 | 2,200 | 1,100 | 1,100 |
| 100,001 - 200,000 | 6,000 | 2,900 | 1,400 | 1,400 |
| 200,001 - 300,000 | 10,500 | 6,700 | 3,300 | 3,300 |
| 300,001 - 400,000 | 15,500 | 9,800 | 4,800 | 4,800 |
| 400,001 - 500,000 | 18,500 | 12,000 | 6,300 | 6,300 |
| Over 500,000 | 20,000 | 13,500 | 7,100 | 7,100 |

Table 302.31-2
 Plan Review Fees for
 Buildings Located in Municipalities that Perform Inspections as an Agent of the Safety and Buildings Division

This table may be utilized for projects in municipalities that are delegated to perform inspections of the object type(s) that you are submitting as a certified municipality and/or agent of the department. Reduced fees do not apply to state owned buildings. Check our website home page at <http://dsps.wi.gov/sb/SB-CommBldgsDeleMunis.html> , or call 608-266-3151 for the current list.

| Area (Square Feet) | Building Plans | HVAC Plans | Fire Alarm System Plans | Fire Suppression System Plans |
|--------------------|----------------|------------|-------------------------|-------------------------------|
| Less than 2,500 | \$250 | \$150 | \$30 | \$ 30 |
| 2,501 - 5,000 | 300 | 200 | 60 | 60 |
| 5,001 - 10,000 | 500 | 300 | 100 | 100 |
| 10,001 - 20,000 | 700 | 400 | 150 | 150 |
| 20,001 - 30,000 | 1,100 | 500 | 200 | 200 |
| 30,001 - 40,000 | 1,400 | 800 | 350 | 350 |
| 40,001 - 50,000 | 1,900 | 1,100 | 500 | 500 |
| 50,001 - 75,000 | 2,600 | 1,400 | 700 | 700 |
| 75,001 - 100,000 | 3,300 | 2,000 | 1,000 | 1,000 |
| 100,001 - 200,000 | 5,400 | 2,600 | 1,200 | 1,200 |
| 200,001 - 300,000 | 9,500 | 6,100 | 3,000 | 3,000 |
| 300,001 - 400,000 | 14,000 | 8,800 | 4,400 | 4,400 |
| 400,001 - 500,000 | 16,700 | 10,800 | 5,600 | 5,600 |
| Over 500,000 | 18,000 | 12,100 | 6,400 | 6,400 |

NOTES:

- A. **Plan entry fee of \$100.00** shall be submitted with each submittal of plans to the department in addition to the plan review and inspection fees.
- B. **Lighting Plans and Calculations** will be reviewed at no additional cost if submitted with the building plans. A fee of \$75 will be charged if submitted with the HVAC plans. A fee of \$75 plus the \$100 submittal fee (total \$175) is required for all lighting plans submitted separately.
- C. A fee reduction may be taken for plans involving **multiple identical buildings** located on the **same site** and **submitted at the same time**: The fees for the submittal of building, heating and ventilation plans for the first building shall be determined in accordance with the appropriate Table 302.31-1 or 302.31-2 on the basis of the total gross area of one building. The fee for each of the remaining identical buildings shall be computed on the basis of an area of less than 2,500 square feet.

